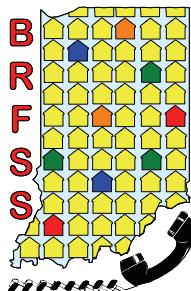


Indiana BRFSS Newsletter



*Indiana State Department of Health
Epidemiology Resource Center
Data Analysis*

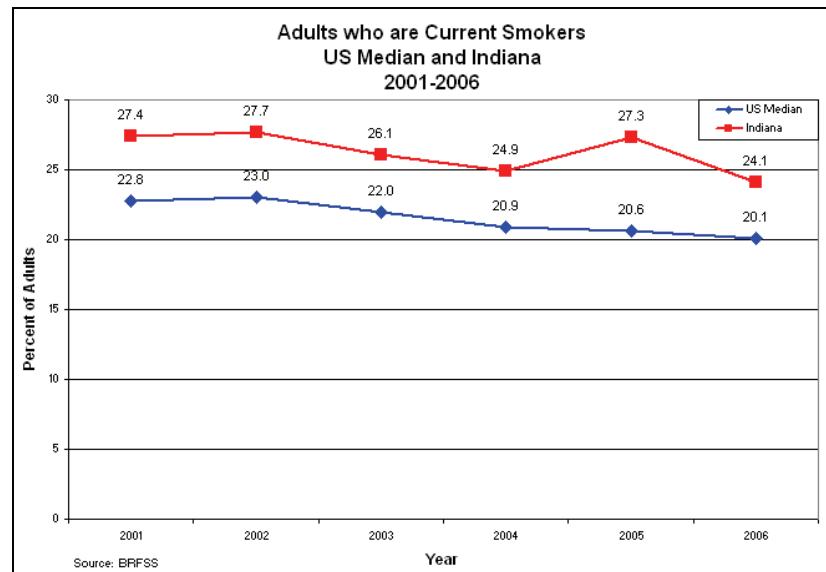
Smoking Among Indiana Adults Data from the 2001-2006 BRFSS

Cigarette smoking is the leading cause of preventable death in the United States. One of the *Healthy People 2010* objectives is to reduce the percentage of adults aged 18 years and older who smoke to 12%. The effects of smoking are well known, resulting in an increased risk for cancer (e.g., lung, oral cavity, and esophagus), coronary heart disease, stroke, and chronic obstructive pulmonary disease. Pregnant women who smoke are at increased risk for complications, premature birth, low birth-weight infants and infant deaths. Secondhand smoke exposure causes heart disease and lung cancer in nonsmoking adults, respiratory symptoms in children, and can cause sudden infant death syndrome. [Source: Centers for Disease Control and Prevention]

Health conditions such as smoking are not reportable; hence, prevalence data must be obtained from another source. The Behavioral Risk Factor Surveillance System (BRFSS) survey is an annual, random digit-dial telephone survey of adults aged 18 years and older. The survey is conducted through a cooperative agreement with the Centers for Disease Control and Prevention (CDC). All 50 states and the District of Columbia participate.

The information on smoking in this report was obtained from the 2001-2006 BRFSS surveys.

Figure 1



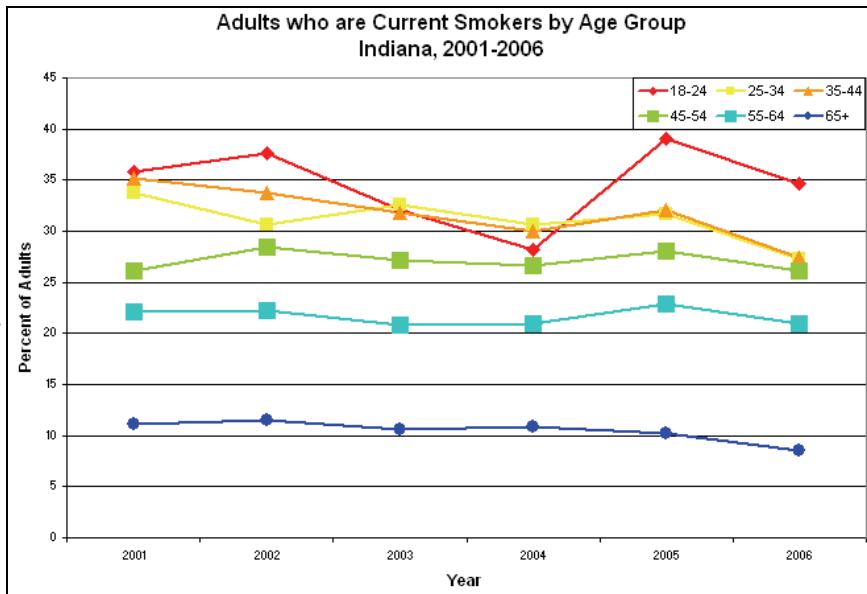
In 2006, the prevalence of adult smoking in Indiana was 24.1% compared to 27.4% in 2001. Even though the prevalence of adult smoking in Indiana exhibited a statistically significant downward trend from 2001-2006, adult smoking prevalence remained consistently higher than the national median (see Figure 1).

Smoking by Age Group

Figure 2

Smoking prevalence decreases with age. From 2001-2006, adults aged 65 years and older had a significantly lower current smoking prevalence than the other age groups (see Figure 2).

In 2006, adults aged 18-24 years had a higher prevalence of smoking than adults in the 25-54 age groups, but the differences were not statistically significant. Adults aged 55-64 and 75 and older were significantly less likely to be current smokers than those aged 18-24 years.



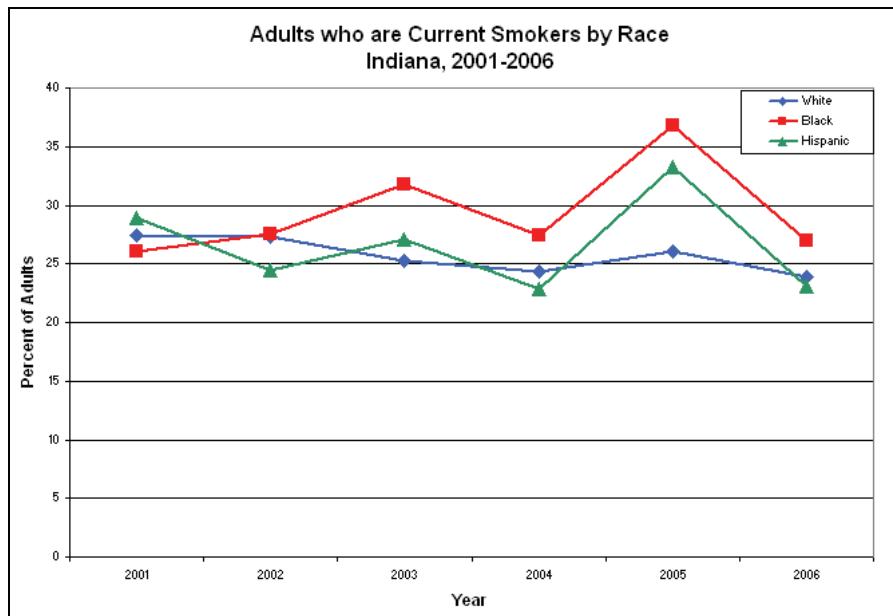
Smoking prevalence for those aged 25-34 decreased from 2001 to 2006, while the prevalence for those aged 45-54 and 55-64 remained relatively stable. Smoking prevalence for those aged 65 and older also decreased.

Adults aged 35-44 had a significant decrease in smoking prevalence from 2001-2006 (35.2% vs. 27.4%, respectively).

Smoking by Race/Ethnicity

Figure 3

There were no significant differences between white and black adults in smoking prevalence except for 2005 (white = 26.1% [95% CI 24.6-27.6], black = 36.8% [95% CI 30.1-43.5]). There were no significant differences among Hispanic adults or white/black smoking prevalence in the six year time frame (see Figure 3). There were no significant differences between white, non-Hispanic and black, non-Hispanic adults by age group in 2006.



Smoking by Sex

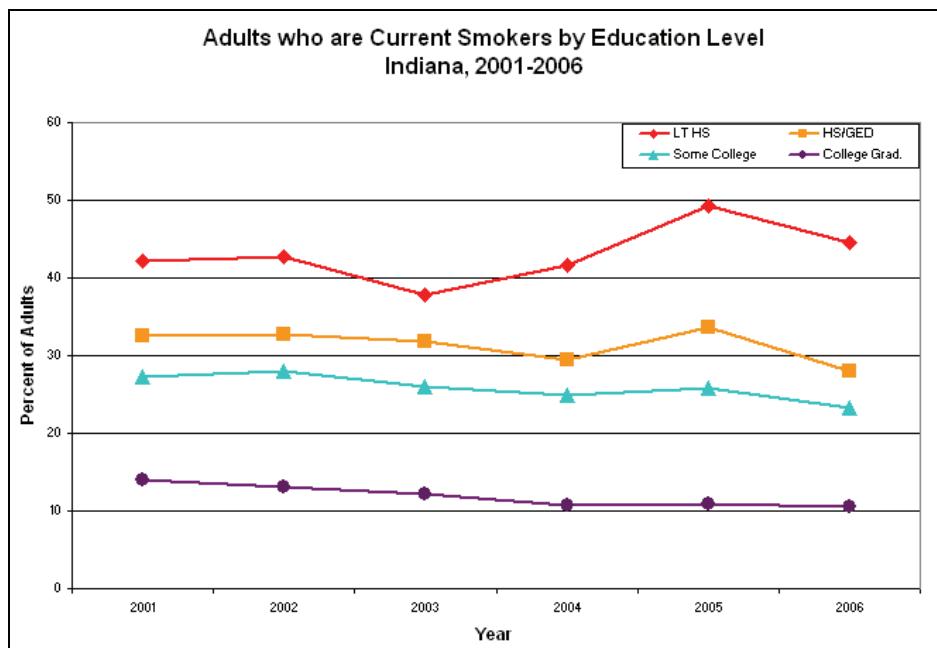
From 2001-2006, males were significantly more likely to be current smokers than females. There was a significant difference between black males and females (34.3% vs. 20.4%, respectively) but not a significant difference between white males and females (25.6% vs. 21.9%, respectively).

There were no significant differences between males and females by age group in 2006.

Smoking by Education Level

From 2001-2006, adults with a high school education or higher displayed a downward trend in smoking. Adults with less than a high school education showed an upward trend (see Figure 4). In 2006, adults with less than a high school education were significantly more likely to be current smokers than adults with a high school or higher education.

Figure 4



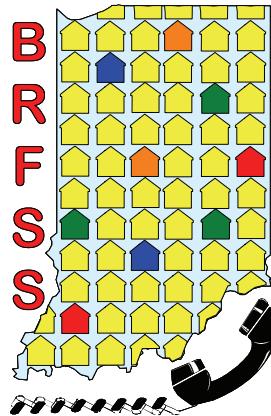
Conclusion

From 2001-2006, adult smoking prevalence in Indiana displayed a significant downward trend. While there has been a slow decline in the smoking prevalence from 2001-2006, smoking remains an important public health issue in Indiana.



Epidemiology Resource Center
Data Analysis
2 North Meridian Street, 3-D
Indianapolis, IN 46204

Phone: 317.233.7416
Fax: 317.233.7378
E-mail: data-analysis@isdh.IN.gov



The Indiana BRFSS Newsletter is published by the Indiana State Department of Health to provide surveillance information to Indiana health professionals and to the public health community.

FIND US ON THE WEB AT:

www.IN.gov/isdh/dataandstatistics/brfss/brfss_index.htm

State Health Commissioner
Judith A. Monroe, MD

Editor
Linda Stemnock

Deputy State Health Commissioner
Mary L. Hill, RN, Esq.

Director, Data Analysis Team
Jon E. Lewis, PhD

State Epidemiologist
Robert F. Teclaw, DVM, MPH, PhD

Design/Layout
Kristy Holzhausen

Data Provider
Centers for Disease Control and Prevention

Surveys
Clearwater Research, Inc.

Acknowledgments

The Epidemiology Resource Center gratefully acknowledges the efforts of the residents of the State of Indiana who took the time to respond to the questions asked in the telephone interviews conducted for this survey.

A special acknowledgment is also extended to the staff of Clearwater Research, Inc., who committed themselves to collecting the BRFSS data in an accurate and professional manner.

The Indiana BRFSS is completed through a cooperative agreement between the Centers for Disease Control and Prevention and the Indiana State Department of Health.

This publication was supported by cooperative agreement number U58/CCU522814-02 from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.

